

MORROW MEMORIAL HOME/AGED, INC.

331 SOUTH WATER STREET

SPARTA 54656 Phone: (608) 269-3168

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 111

Total Licensed Bed Capacity (12/31/03): 111

Number of Residents on 12/31/03: 110

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 106

Nonprofit Church/Corporation

Skilled

No

Yes

Yes

106

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		11.8
Supp. Home Care-Personal Care	No					1 - 4 Years		47.3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.9	Under 65	4.5	More Than 4 Years		20.9
Day Services	No	Mental Illness (Org./Psy)	10.9	65 - 74	4.5			----
Respite Care	No	Mental Illness (Other)	4.5	75 - 84	33.6			80.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	49.1	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.9	95 & Over	8.2	Full-Time Equivalent		
Congregate Meals	No	Cancer	1.8		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	8.2		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	35.5	65 & Over	95.5	-----		
Transportation	Yes	Cerebrovascular	6.4	-----	----	RNs		9.2
Referral Service	Yes	Diabetes	2.7	Gender	%	LPNs		6.4
Other Services	Yes	Respiratory	8.2	-----	----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	20.0	Male	22.7	Aides, & Orderlies		
Mentally Ill	No		----	Female	77.3			
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care		Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	1	1.3	137	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.9
Skilled Care	6	100.0	317	69	88.5	118	0	0.0	0	25	96.2	158	0	0.0	0	0	0.0	0	100	90.9
Intermediate	---	---	---	8	10.3	98	0	0.0	0	1	3.8	148	0	0.0	0	0	0.0	0	9	8.2
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	6	100.0		78	100.0		0	0.0		26	100.0		0	0.0		0	0.0		110	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	11.8	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	7.1	Bathing	0.0	89.1	10.9	110
Other Nursing Homes	11.8	Dressing	12.7	76.4	10.9	110
Acute Care Hospitals	65.9	Transferring	29.1	60.0	10.9	110
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	26.4	59.1	14.5	110
Rehabilitation Hospitals	0.0	Eating	48.2	45.5	6.4	110
Other Locations	3.5	*****				
Total Number of Admissions	85	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	4.5	Receiving Respiratory Care		11.8
Private Home/No Home Health	17.5	Occ/Freq. Incontinent of Bladder	51.8	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	17.5	Occ/Freq. Incontinent of Bowel	17.3	Receiving Suctioning		0.0
Other Nursing Homes	5.0			Receiving Ostomy Care		3.6
Acute Care Hospitals	5.0	Mobility		Receiving Tube Feeding		1.8
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		30.0
Rehabilitation Hospitals	0.0					
Other Locations	3.8	Skin Care		Other Resident Characteristics		
Deaths	51.3	With Pressure Sores	6.4	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	3.6	Medications		
(Including Deaths)	80			Receiving Psychoactive Drugs		81.8

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit Peer %	Group Ratio	Bed Size: 100-199 Peer %	Ratio	Licensure: Skilled Peer %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.5	86.2	1.11	84.0	1.14	84.0	1.14	87.4	1.09
Current Residents from In-County	86.4	78.8	1.10	80.7	1.07	76.2	1.13	76.7	1.13
Admissions from In-County, Still Residing	38.8	24.5	1.58	21.5	1.80	22.2	1.75	19.6	1.98
Admissions/Average Daily Census	80.2	110.9	0.72	135.6	0.59	122.3	0.66	141.3	0.57
Discharges/Average Daily Census	75.5	116.1	0.65	137.2	0.55	124.3	0.61	142.5	0.53
Discharges To Private Residence/Average Daily Census	26.4	44.0	0.60	62.4	0.42	53.4	0.49	61.6	0.43
Residents Receiving Skilled Care	91.8	94.4	0.97	94.8	0.97	94.8	0.97	88.1	1.04
Residents Aged 65 and Older	95.5	96.1	0.99	94.5	1.01	93.5	1.02	87.8	1.09
Title 19 (Medicaid) Funded Residents	70.9	68.3	1.04	71.9	0.99	69.5	1.02	65.9	1.08
Private Pay Funded Residents	23.6	22.4	1.06	17.4	1.36	19.4	1.22	21.0	1.13
Developmentally Disabled Residents	0.9	0.6	1.57	0.6	1.55	0.6	1.44	6.5	0.14
Mentally Ill Residents	15.5	36.9	0.42	31.8	0.49	36.5	0.42	33.6	0.46
General Medical Service Residents	20.0	17.2	1.16	21.1	0.95	18.8	1.06	20.6	0.97
Impaired ADL (Mean)	43.8	48.1	0.91	47.6	0.92	46.9	0.93	49.4	0.89
Psychological Problems	81.8	57.5	1.42	57.6	1.42	58.4	1.40	57.4	1.43
Nursing Care Required (Mean)	7.2	6.8	1.05	7.8	0.92	7.2	1.00	7.3	0.98